IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| IN THE OMITED STA | A1201A | ILITIA | IN INADEMIA | ICIC OT LIGHT | | 7 V |
|--|---------------------------------|---|--|--|----------------|--------------|
| In recatent Application of | Atty Dkt. | PTB-44 | 12-16 | • | H | W |
| 8 | | C# | M# | | | |
| CORLETTE ET AL. (MAR 1 3 2008 g) TC/A | | 4123 | | | | |
| 13/ | xaminer: | | • | | | |
| Filed: October 7, 2005 | | March ' | 13, 2008 | | | |
| Title: MICROWAVE BASED MONITORING SYSTE | EM AND M | ETHOD | | | | |
| Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | | | | | · |
| Sir: | | | | | | |
| This is a response/amendment/letter in the above | | | ENT/LETTER ation and includ | les an attachment which is | here | hv |
| incorporated by reference and the signature belo signature thereon. | w serves | as the si | ignature to the | attachment in the absence | of ar | ny other |
| ☐ Correspondence Address Indicati | on Forn | n Attac | hed. | | | |
| Fees are attached as calculated below: Total effective claims after amendment 17 | minus | highest i | numher | | | |
| previously paid for 20 (at least 20) = | | x \$50.00 | | \$0.00 (1202)/\$0.00 (2202) | \$ | |
| Independent claims after amendment previously paid for 3 (at least 3) = | | highest (x \$210.0 | | \$0.00 (1201)/\$0.00 (2201) | \$ | |
| If proper multiple dependent claims now added | for first tin | ne, (igno | re improper); a | dd | | |
| Petition is hereby made to extend the current du paper and attachment(s) | One Two M Three M Four | Month Nonth Ex Ionth Ext Month E | over the filing da Extension \$120 tensions \$460.0 ensions \$1050 xtensions \$164 | 0.00 (1203)/\$185.00 (2203) ate of this 0.00 (1251)/\$60.00 (2251) 00 (1252)/\$230.00 (2252) .00 (1253/\$525.00 (2253) 10.00 (1254/\$820.00 (2254) 0.00 (1255/\$1115.00 (2255) |) | 120.00 |
| Terminal disclaimer enclosed, add | | | \$130 | 0.00 (1814)/ \$65.00 (2814) | \$ | |
| ☐ Applicant claims "small entity" status. ☐ | Statemer | nt filed he | erewith | | | |
| Rule 56 Information Disclosure Statement Filing | Fee . | | | \$180.00 (1806) | \$ | 0.00 |
| Assignment Recording Fee | | | | \$40.00 (8021) | \$ | 0.00 |
| Other: | | | | | \$ | 0.00 |
| | | | | TOTAL FEE | \$ | 120.00 |
| CREDIT CARD PAYMENT FORM | | | | | | |
| The Commissioner is hereby authorized to charg asserted to be filed, or which should have been f firm) to our Account No. 14-1140. A <u>duplicate</u> co | iled herev | vith (or w | vith any paper h | verpayment, in the fee(s) fil nereafter filed in this applica | ed, o ation | r by this |
| 901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 | | | ANDERHYE P. ul T. Bowen, Re | | | |
| Facsimile: (703) 816-4100 PTB:jck | Sigi | nature: | | MV - | | |